24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA	
	C C00499020
	M = M / D = D / Y = Y = Y
Check if 24-hour report 48-hour report New report Amends report filed	d on
Full Name of Payee Comfort Suites-Biltmore	Date of Public Distribution/Dissemination
	05 02 / Y Y Y Y Y Y
Mailing Address 890 Brevard Rd.	Amount
City State Zip Code	532.76
Asheville ND 28806	Transaction ID : SE.26974 Date of Disbursement or Obligation
Purpose of Expenditure IE-Brannon-Travel Category/ Type 002	05 02 7 2014
Name of Federal Candidate Support Offic	e Sought: House District: 00
GREGORY JOSEPH BRANNON Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought Disb. 2014	
	Other (specify) ▶
Full Name of Payee Delta Airlines	Date of Public Distribution/Dissemination
Mailing Address PO Box 20706	05 02 2014
PO Box 20706	Amount
City State Zip Code	1041.00
Atlanta GA 30320	Transaction ID : SE.26973 Date of Disbursement or Obligation
Purpose of Expenditure IE-Brannon-Travel Category/ Type 002	05 / 02 / 2014
Name of Federal Candidate Support Office	ce Sought: House District: 00
GREGORY JOSEPH BRANNON Oppose	President State: NC State:
Calendar Year-To-Date Per Election for Office Sought Disb 2014	oursement For: Primary General Other (specify)
	Care (cpccin)
(a) SUBTOTAL of Itemized Independent Expenditures	1573.76
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
R. Russ Walker [Electronically Filed] Date	05 03 2014
Signature	

Schedule E)	PAGE 2 OF 6 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA	FEC IDENTIFICATION NUMBER	•		
FREEDOWWORKS FOR AWERICA	C C00499020]		
Check if 24-hour report 48-hour report New	w report Amends report filed on Amends report]		
Full Name of Payee	Date of Public Distribution/Dissemination			
Enterprise	05 / 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 4202 Air Ram Rd.	Amount			
City State	Zip Code 948.58			
Charlotte ND	28214 Transaction ID : SE.26981 Date of Disbursement or Obligation			
Purpose of Expenditure IE-Brannon-Travel	Category/			
Name of Federal Candidate	Support Office Sought: House District: 00			
GREGORY JOSEPH BRANNON	Oppose President X Senate State: NC	_		
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2014 Other (specify) ▶	al		
Full Name of Payee	Date of Public Distribution/Dissemination			
Freedomworks, Inc.	05 02 2014	\neg		
Mailing Address 400 N Capitol St., NW		-		
Suite 735	Amount			
City State	Zip Code 951.68			
Washington DC	20001 Transaction ID : SE.26972 Date of Disbursement or Obligation			
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing	Category/ Type 004 05 02 / Y 2014			
Name of Federal Candidate	Support Office Sought: House District: 00			
KAY R HAGAN	Oppose President Senate State: NC	_		
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☐ Primary ☐ Gener 2014 ☐ Other (specify) ►	al 		
(a) SUBTOTAL of Itemized Independent Expenditures		7		
(,)	7	-		
(b) SUBTOTAL of Unitemized Independent Expenditures]		
(c) TOTAL Independent Expenditures	· · · · · · · · · · · · · · · · · · ·			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
R. Russ Walker [Electrics of Signature]	ectronically Filed] Date 05 03 2014			
Signaturo				

Schedule E)	PAGE 3 OF 6 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
FREEDOMWORKS FOR AMERICA	C C00499020			
Check if X 24-hour report 48-hour report New report Amends report	filed on M = M / D = D / Y = Y = Y			
Full Name of Payee Freedomworks, Inc.	Date of Public Distribution/Dissemination			
Mailing Address 400 N Capitol St., NW	05 02 2014 Amount			
Suite 735				
City State Zip Code Washington DC 20001	1870.85 Transaction ID : SE.26982			
Purpose of Expenditure IE-Brannon-Travel Category/ Type 002	Date of Disbursement or Obligation 05 02 2014			
Name of Federal Candidate Support C	Office Sought: House District: 00			
GREGORY JOSEPH BRANNON Oppose	President Senate State: NC			
	Disbursement For:			
Full Name of Payee Gorden Bierch-NC	Date of Public Distribution/Dissemination			
Mailing Address	05 02 2014			
City Chate 7in Code	Amount			
City State Zip Code	52.28 Transaction ID : SE.26977 Date of Disbursement or Obligation			
Purpose of Expenditure IE-Brannon-Food/Beverage Category/ Type 002	05 02 2014			
Name of Federal Candidate Support	Office Sought: House District:00			
GREGORY JOSEPH BRANNON Oppose	President Senate State: NC			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: X Primary General 2014 Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures	1923.13			
(b) SUBTOTAL of Unitemized Independent Expenditures	•			
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
R. Russ Walker [Electronically Filed] Date	05 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
- 0				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼					
FREEDOMWORKS FOR AMERICA	C C00499020				
	<u> </u>				
Check if X 24-hour report 48-hour report New report Amends report filed	d on Mam / Dab / Yayayay				
Full Name of Payee	Date of Public Distribution/Dissemination				
Hampton Inn & Suites-NC	05 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address 2731 Little Rock Rd.	Amount				
City State Zip Code	1097.16				
Charlotte NC 28214	Transaction ID : SE.26976 Date of Disbursement or Obligation				
Purpose of Expenditure IE-Brannn-Travel Category/ Type 002	05 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Name of Federal Candidate Support Offic	e Sought: House District:00				
GREGORY JOSEPH BRANNON Oppose	President State: NC				
Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For: X Primary General Other (specify) ▶				
Full Name of Payee	Date of Public Distribution/Dissemination				
Red Top Cab	05 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address 3251 Washington Blvd.	Amount				
City State Zip Code	22.62				
Arlington VA 22201	Transaction ID : SE.26978 Date of Disbursement or Obligation				
Purpose of Expenditure IE-Brannon-Travel Category/ Type 002	05 / 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Name of Federal Candidate Support Office	e Sought: House District: 00				
GREGORY JOSEPH BRANNON Oppose	President State: NC State:				
Calendar Year-To-Date Per Election for Office Sought Disb 201	ursement For:				
(a) SUBTOTAL of Itemized Independent Expenditures	1119.78				
ŕ	7 7 7				
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7				
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
	05 03 2014				
Signature					

Schedule E)	EXI END	TOTILO		PAGE 5 OF 6 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA				FEC IDENTIFICATION NUMBER ▼		
FREEDOWWORKS FOR AMERICA				C C00499020		
Check if 24-hour report 48-hour report	New repo	ort Amends repo		= M / D = D / Y = Y = Y		
Full Name of Payee			Date o	of Public Distribution/Dissemination		
US Air				05 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 400 East Sky Harbor Blvd.			Amour	nt		
City	State	Zip Code		529.00		
Phoenix	AZ 85034			action ID : SE.26975 of Disbursement or Obligation		
Purpose of Expenditure IE-Brannon-Travel		Category/ Type 002	M	05 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate		X Support	Office Sought	: House District: 00		
GREGORY JOSEPH BRANNON		Oppose	Preside			
Calendar Year-To-Date Per Election for Office Sought		31060.18	Disbursement 2014 Ot	t For:		
Full Name of Payee			Date of	of Public Distribution/Dissemination		
R. Russ Walker				05 02 7 2014		
Mailing Address 400 N. Capitol St., NW			Amou	nt		
Suite 765						
City	State	Zip Code	T	27.00		
Washington	DC	20001		ction ID : SE.26983 If Disbursement or Obligation		
Purpose of Expenditure IE-Brannon-Mileage		Category/ Type 002		05 DD Z Y Y Y Y Y Y		
Name of Federal Candidate		X Support	Office Sough	t: House District: 00		
GREGORY JOSEPH BRANNON		Oppose	Preside			
Calendar Year-To-Date Per Election for Office Sought	, , ,	134149.15	Disbursemen 2014 O	t For:		
(a) SUBTOTAL of Itemized Independent Expenditures	S			556.00		
#N -11						
(b) SUBTOTAL of Unitemized Independent Expenditu	ires		· •	7 7 7		
(c) TOTAL Independent Expenditures			•	71171171		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
R. Russ Walker Signature	[Electron	ically Filed] Date	05 /	03 2014		
Olgitature						

PAGE OF (Schedule E) FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ FREEDOMWORKS FOR AMERICA C00499020 Check if | 24-hour report 48-hour report X New report Amends report filed on Full Name of Payee Date of Public Distribution/Dissemination Heather Williamson 2014 05 02 Mailing Address 1086 Topaz Dr Amount State Zip Code 19.06 City UT 84045 Transaction ID: SE.26984 Saratoga Springs Date of Disbursement or Obligation Purpose of Expenditure Category/ IE-Brannon-Travel 002 05 02 2014 Type Name of Federal Candidate 00 X Support Office Sought: District: House **GREGORY JOSEPH BRANNON** NC Oppose X Senate President State: Primary Disbursement For: General Calendar Year-To-Date 2014 134122.15 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Mailing Address Amount City State Zip Code Date of Disbursement or Obligation Purpose of Expenditure Category/ Type Name of Federal Candidate Support Office Sought: House District: Oppose President Senate State: Disbursement For: Primary General Calendar Year-To-Date Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 19.06 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... 7091.99 Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. R. Russ Walker [Electronically Filed] 05 03 2014 Date Signature